

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of

Roy A. BLACK *et al.*

Serial No. 09/244,984

Filed: February 4, 1999



Group Art Unit: 1631

Examiner: N. Ogihara

**RECEIVED**

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TECH CENTER 1600/2900

For: CRYSTALLINE TNF- $\alpha$ -CONVERTING ENZYME AND USES THEREOFAMENDMENT TRANSMITTALCommissioner for Patents  
Washington, D.C. 20231

Sir:

Transmitted herewith is Amendment A in the above-identified application.

☐ Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a Small Entity statement previously submitted.

☐ Small Entity statement is enclosed.

☐ The fee required for additional claims is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
Total Claims:	25	62	0	x \$18.00	\$0.00
Independents:	3	9	0	x \$80.00	\$0.00
First presentation of any Multiple Dependent Claims:			+	\$270.00	\$0.00
CLAIMS FEE TOTAL:					\$0.00

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. § 1.136(a) for the total number of months checked below:

<input type="checkbox"/>	Extension for response filed within the first month:	\$110.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$390.00	\$0.00
<input checked="" type="checkbox"/>	Extension for response filed within the third month:	\$890.00	\$890.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,390.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$1,890.00	\$0.00
EXTENSION FEE TOTAL:			\$890.00
CLAIMS AND EXTENSION FEE TOTAL:			\$890.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract 1/2 of above):		\$0.00
TOTAL FEE:			\$890.00

☐ Please charge Deposit Account No. 19-0741 in the amount of \$0.00 .  
A duplicate copy of this transmittal is enclosed.

[ X ] A check in the amount of \$890.00 is enclosed.

[ X ] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

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Feb 5, 2001  
Date

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